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**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

09/028514

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2		/		/		
3		/		/		
4		/		/		
5		/		/		
6		/		/		
7		/		/		
8		/		/		
9		/		/		
10		/		/		
11		/		/		
12		/		/		
13		/		/		
14		/		/		
15	/		/			
16		/		/		
17		/		/		
18		/		/		
19		/		/		
20		/		/		
21		/		/		
22	/		/			
23		/		/		
24		/		/		
25		/		/		
26		/		/		
27		/		/		
28		/		/		
29		/		/		
30		3		3		
31		3		3		
32		3		3		
33		3		3		
34		3		3		
35		3		3		
36		3		3		
37		3		3		
38	/					
39	/					
40		/		/		
41		/		/		
42		3		3		
43		3		3		
44		3		3		
45		3		3		
46		2		2		
47		2		2		
48	/					
49		/		/		
50		/		/		
TOTAL IND.			6			
TOTAL DEP.				108		
TOTAL CLAIMS			112			

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		/		/		
52		/		/		
53		/		/		
54		/		/		
55		/		/		
56		/		/		
57		/		/		
58		/		/		
59		/		/		
60		/		/		
61		/		/		
62	/					
63		/		/		
64		/		/		
65		/		/		
66		/		/		
67	/					
68	/					
69		2		2		
70		2		2		
71		2		2		
72		2		2		
73	/					
74		/		/		
75		/		/		
76		/		/		
77		/		/		
78		/		/		
79		3		3		
80		3		3		
81		3		3		
82		3		3		
83		3		3		
84	/					
85		/		/		
86		/		/		
87		/		/		
88		/		/		
89		/		/		
90		/		/		
91		/		/		
92		/		/		
93		/		/		
94		/		/		
95		/		/		
96		/		/		
97		/		/		
98		2		2		
99	/					
100		/		/		
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

09/028,574

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1		1	X			
2		1				
3		1				
4		1				
5		2				
6	1			1		
7		1		1		
8		1		1		
9		1		1		
10		1	X			
11		1				
12		2		2		
13	1		X			
14		1				
15		1				
16		1				
17		1				
18		1				
19		1				
20		1				
21		2				
22		1				
23		1				
24		1				
25		1				
26		1				
27		1				
28		2				
29	1					
30		1				
31		1				
32		1				
33		1				
34		1				
35		3				
36		3				
37		3				
38		3				
39		1				
40			X			
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51				1		
52				1		
53				1		
54				1		
55				1		
56				1		
57				1		
58				1		
59				1		
60				1		
61				1		
62				1		
63				1		
64				1		
65				1		
66				1		
67				1		
68				1		
69				1		
70				1		
71				1		
72				1		
73				1		
74				1		
75						
76						
77						
78						
79						
80						
81						
82						
83						
84						
85						
86						
87						
88						
89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS